Inited States Bankruptcy Court for the:		
MIDDLE DISTRICT OF PENNSYLVANIA		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is ar amended filing
	☐ Chapter 13	

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Dori First name J	First name
	Bring your picture identification to your	Motter	Middle name
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names and any assumed, trade names and doing business as names.	Dori J Hummel Dori J Zerance	
	Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8466	

Del	otor 1 Dori J Motter		Case number (if known)
4.	Your Employer Identification Number (EIN), if any.	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
5.	Where you live		If Debtor 2 lives at a different address:
		1074 Leroy Dr Newport, PA 17074 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Perry County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Det	otor 1 Dori J Motter				Case number (if known)
					-
Par	t 2: Tell the Court About	our Bankrup	otcy Case		
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief de	scription of each, see <i>Notice Required</i> the top of page 1 and check the appro	If by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy priate box.
	choosing to file under	Chapter	7		
		☐ Chapter	11		
		☐ Chapter	12		
		☐ Chapter	13		
8.	How you will pay the fee	about order.	how you may	pay. Typically, if you are paying the fe ey is submitting your payment on your	check with the clerk's office in your local court for more details se yourself, you may pay with cash, cashier's check, or money behalf, your attorney may pay with a credit card or check with
					option, sign and attach the Application for Individuals to Pay
			J	stallments (Official Form 103A).	ption only if you are filing for Chapter 7. By law, a judge may,
		but is applie	not required s to your fam	o, waive your fee, and may do so only ly size and you are unable to pay the	if your income is less than 150% of the official poverty line the ee in installments). If you choose this option, you must fill out Official Form 103B) and file it with your petition.
9.	Have you filed for	■ No.			
	bankruptcy within the last 8 years?	☐ Yes.			
		[District	When	Case number
		Ε	District	When	Case number
		[District	When	Case number
10.	Are any bankruptcy cases pending or being	■ No			
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.			
			Debtor		Relationship to you
			District	When	Case number, if known
		[Debtor		Relationship to you
			District	When	Case number, if known
11.	Do you rent your residence?	■ No.	Go to line 12		
	residence r	☐ Yes.	Has your lan	dlord obtained an eviction judgment ag	gainst you?
			☐ No. 0	io to line 12.	
				Fill out <i>Initial Statement About an Evic</i> ankruptcy petition.	tion Judgment Against You (Form 101A) and file it as part of

Deb	tor 1 Dori J Motter				Case number (if known)
Par	t 3: Report About Any Bu	isinesses	You Owr	ı as a Sole Proprieto	or
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of busin	ness
	A sole proprietorship is a				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, State	e & ZIP Code
	it to this petition.		Chec	k the appropriate box	to describe your business:
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S. C. § 1182(1)? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	proceed you are o	under Suchoosing vistateme ()(B). I am Code	to proceed under Subtent, and federal incommot filing under Chapter 1 c. filing under Chapter 1 c.	court must know whether you are a small business debtor or a debtor choosing to can set appropriate deadlines. If you indicate that you are a small business debtor or ochapter V, you must attach your most recent balance sheet, statement of operations, lee tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. ter 11. If the business debtor according to the definition in the Bankruptcy and a small business debtor according to the definition in the Bankruptcy Code, and a under Subchapter V of Chapter 11. If I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.
Par	t 4: Report if You Own or	r Have Any		,	Property That Needs Immediate Attention
14.	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	■ No.	What is	the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is , why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where	is the property?	
	- '				Number, Street, City, State & Zip Code
	no service and the service and				

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about
credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

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I am not required to receive a briefing about credit
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Incapacity.

> I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debt	or 1 Dori J Motter			Case number	(if known)
art	6: Answer These Questi	ons for R	eporting Purposes		
	What kind of debts do you have?	16a.		sumer debts? Consumer debts are definental, family, or household purpose."	ed in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		siness debts? <i>Business debts</i> are debts th tment or through the operation of the busin	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you ow	ve that are not consumer debts or business	s debts
7.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7	7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do are paid that funds will be ava	o you estimate that after any exempt prope ilable to distribute to unsecured creditors?	erty is excluded and administrative expenses
	administrative expenses are paid that funds will		■ No		
	be available for distribution to unsecured creditors?		☐ Yes		
18.	How many Creditors do	1 -49		□ 1,000-5,000	1 25,001-50,000
	you estimate that you owe?	□ 50-99)	☐ 5001-10,000	☐ 50,001-100,000
		☐ 100-1 ☐ 200-9		☐ 10,001-25,000	☐ More than100,000
19.	How much do you	□ \$0 - S		☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		001 - \$100,000	☐ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion
	be worth:	•	,001 - \$500,000	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		LJ \$500	,001 - \$1 million	# 100,000,001 - \$300 mmon	La Wore train \$50 billion
20.	How much do you	□ \$0 - 5	\$50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your liabilities to be?	□ \$50,	,001 - \$100,000	☐ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion
			,001 - \$500,000	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		LJ \$500	1,001 - \$1 million	ш \$100,000,001 - \$300 mmon	D Word than \$50 billion
ar	7: Sign Below				
or	you	l have e	xamined this petition, and I dec	lare under penalty of perjury that the infor	nation provided is true and correct.
				, I am aware that I may proceed, if eligible elief available under each chapter, and I cl	
				not pay or agree to pay someone who is no e notice required by 11 U.S.C. § 342(b).	ot an attorney to help me fill out this
		I reques	st relief in accordance with the c	chapter of title 11, United States Code, spe	ecified in this petition.
		l unders bankrup and 357	otcy case can result in fines up t	concealing property, or obtaining money to \$250,000, or imprisonment for up to 20	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519
			Motter ire of Debtor 1	Signature of Debto	or 2
		Execute	ed on 01d 22/23	Executed on MN	M / DD / YYYY

Official Form 101

Desc

Debtor 1 Dori J Motter		Case	e number (if known)
For your attorney, if you are	I the atterney for the debter(s) person in this and		
represented by one	I, the attorney for the debtor(s) named in this peti under Chapter 7, 11, 12, or 13 of title 11, United S for which the person is eligible. I also certify that	States Code, and have ex	olained the relief available under each chanter
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, ce schedules filed with the petition is incorrect. Signature of Attorney for Debtor	rtify that I have no knowl	edge after an inquiry that the information in the () () () () () () () () () () () () () (
	Donald K. Zagurskie 62494 Printed name		
	Johnston & Zagurskie, PC		
	117 Main Street PO Box O Mifflin, PA 17058		
	Number, Street, City, State & ZIP Code Contact phone 717-436-8044	Email address	jzmlawoffice@gmail.com
	62494 PA Bar number & State		

Fill i	n this informa	ition to identify your	case:				
Debt	or 1	Dori J Motter					
Debt	or 2	First Name	Middle Name	Last Name			
	se if, filing)	First Name	Middle Name	Last Name			
Unite	ed States Bank	cruptcy Court for the:	MIDDLE DISTRICT	OF PENNSYLVANIA			
Case (if kno	e number wn)						if this is an ed filing
				-	*		-
Off	icial For	ո 106Sum					
			and Liabilities	and Certain Statis	tical Information	1	2/15
infori your	mation. Fill oເ original forms	it all of your schedules, you must fill out a	es first; then complete	ple are filing together, both e the information on this for eck the box at the top of th	rm. If you are filing amend		
Part	1: Summar	ize Your Assets					
						Your as Value o	sets what you own
1.		3: Property (Official Fo 55, Total real estate, fo				\$	109,980.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A	/B		\$	47,554.37
	1c. Copy line	63, Total of all propert	y on Schedule A/B			\$	157,534.37
Part	2: Summai	rize Your Liabilities			***************************************		
						Your lia Amount	bilities you owe
2.				erty (Official Form 106D) at the bottom of the last page	e of Part 1 of Schedule D	\$	160,182.82
3.	Schedule E/F 3a. Copy the	: Creditors Who Have total claims from Part	<i>Unsecured Claims</i> (Off 1 (priority unsecured cl	icial Form 106E/F) aims) from line 6e of <i>Schedu</i>	le E/F	\$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecure	ed claims) from line 6j of Sche	edule E/F	\$	59,576.02
					V	•	040.750.04
					Your total liabilities	\$	219,758.84
Part	3: Summai	rize Your Income and	Expenses				
4.		our Income (Official Fo				and the second s	0 #00 41
	Copy your cor	mbined monthly incom	e from line 12 of Scheo	dule I		\$	3,503.11
5.		our Expenses (Official onthly expenses from li				\$	3,479.40
Part	4: Answer	These Questions for	Administrative and S	tatistical Records			
6.	-		er Chapters 7, 11, or on this part of the form	13? n. Check this box and submit.	this form to the court with yo	ur other sch	edules.
	■ Yes						
7.	What kind of	debt do you have?					
	Your de househo	bts are primarily con ld purpose." 11 U.S.C	sumer debts. Consum § 101(8). Fill out lines	ner debts are those "incurred l 8-9g for statistical purposes.	by an individual primarily for 28 U.S.C. § 159.	a personal,	family, or
	☐ Your de the court	bts are not primarily with your other sched	consumer debts. You ules.	have nothing to report on this	s part of the form. Check thi	s box and s	ubmit this form to
Offic	ial Form 106S	•		iabilities and Certain Statist	tical Information	,	page 1 of 2

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8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

4,013.56

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	6,656.54
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	6,656.54

Debtor 1	Dori J	Motte	•					
CDIOI 1	First Name			Name	Last Name			
ebtor 2 pouse, if filing)) First Name	e	Middle	Name	Last Name			
nited State	s Bankruptcy C	ourt for	the: MIDDLE D	ISTRICT	OF PENNSYLVANIA			
							_	7
ase numbe	31						L	 Check if this is an amended filing
Official	Form 106	6A/B						
ched	ule A/B	: Pr	operty					12/15
ink it fits bes formation. If nswer every	st. Be as comple more space is n question.	ete and a reeded, a	ccurate as possibl attach a separate si	e. If two heet to th	only once. If an asset fits in more than or married people are filing together, both an his form. On the top of any additional page Estate You Own or Have an Interest In	re equally responsible t	for supp	plying correct
Do you owr	n or have any leg	gal or eq	uitable interest in a	ıny reside	ence, building, land, or similar property?			
□ No. Go to	o Part 2.							
	nere is the propert	tv?						
		•		What	is the property? Check all that apply			
113 W	McClure St		cription	What	Single-family home			ms or exemptions. Put claims on Schedule D:
113 W	/ McClure St dress, if available, or		cription	What		the amount of any s	ecured	ms or exemptions. Put claims on Schedule D: s Secured by Property.
113 W			cription		Single-family home Duplex or multi-unit building	the amount of any s Creditors Who Have	ecured e Claims	claims on Śchedule D: s Secured by Property.
113 W Street add			cription 17068-0000		Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any s	ecured e Claims	claims on <i>Schedule D:</i>
113 W Street add	dress, if available, or	other desc			Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	the amount of any s Creditors Who Have Current value of th	ecured e Claims	claims on Schedule D: s Secured by Property. Current value of the portion you own?
113 W Street add	dress, if available, or	other desc	17068-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Current value of the entire property? \$109,980.	ecured e Claims	claims on Schedule D: s Secured by Property. Current value of the portion you own? \$109,980.00 ur ownership interest
113 W Street add	dress, if available, or	other desc	17068-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one	Current value of the entire property? \$109,980. Describe the natur (such as fee simpling a life estate), if known	ecured e Claims	claims on Schedule D: s Secured by Property. Current value of the portion you own? \$109,980.0 ur ownership interest
113 W Street add	dress, if available, or	other desc	17068-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Current value of the entire property? \$109,980. Describe the natur (such as fee simple)	ecured e Claims	claims on Schedule D: s Secured by Property. Current value of the portion you own? \$109,980.00
113 W Street add	dress, if available, or	other desc	17068-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only	Current value of the entire property? \$109,980. Describe the natur (such as fee simple a life estate), if known fee simple	ecured e Claims e 00 e of you e, tenar	claims on Schedule D: s Secured by Property. Current value of the portion you own? \$109,980.00 ur ownership interest ncy by the entireties, o
New B	dress, if available, or	other desc	17068-0000	Who	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Current value of the entire property? \$109,980. Describe the natur (such as fee simple a life estate), if known fee simple	ecured claims e Claims e OO e of you e, tenar own.	claims on Schedule D: s Secured by Property. Current value of the portion you own? \$109,980.00 ur ownership interest
New B	dress, if available, or	other desc	17068-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property? \$109,980. Describe the natur (such as fee simple a life estate), if known fee simple Check if this if (see instructions)	ecured claims e Claims e OO e of you e, tenar own.	claims on Schedule D: s Secured by Property. Current value of the portion you own? \$109,980.00 ur ownership interest ncy by the entireties, o
New B	dress, if available, or	other desc	17068-0000	Who	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another or information you wish to add about this it	Current value of the entire property? \$109,980. Describe the natur (such as fee simple a life estate), if known fee simple Check if this in (see instructions)	ecured e Claims ne o o o o o o o o o o o o o	claims on Schedule D: s Secured by Property. Current value of the portion you own? \$109,980.0 ur ownership interest ncy by the entireties, continuity property
New B	dress, if available, or	other desc	17068-0000	Who	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this iterty identification number:	Current value of the entire property? \$109,980. Describe the natur (such as fee simple a life estate), if known fee simple Check if this in (see instructions)	ecured e Claims ne o o o o o o o o o o o o o	claims on Schedule D: s Secured by Property. Current value of the portion you own? \$109,980.0 ur ownership interest ncy by the entireties, o
New B City Perry County	dress, if available, or all a second and a second and a second a s	PA State	17068-0000 ZIP Code	Who Other prope Value	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this iterty identification number:	Current value of the entire property? \$109,980. Describe the natur (such as fee simple Check if this i (see instructions) tem, such as local times the assesse	ecured e Claims ne o o o o o o o o o o o o o	claims on Schedule D: s Secured by Property. Current value of the portion you own? \$109,980.0 ur ownership interest ncy by the entireties, continuity property

someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debt	or 1 Dori J	Motter		Case number (if known)	
3. C a	rs, vans, truck	s, tractors, sport utility ve	hicles, motorcycles		
	No				
_	Yes				
3.1	Make: For	rd	Who has an interest in the property? Check one		claims or exemptions. Put
0.1	Model: Ed		■ Debtor 1 only		red claims on Schedule D: aims Secured by Property.
	Year: 201		Debtor 2 only	Current value of the	Current value of the
	Approximate m	ileage: 22,000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information	on:	\square At least one of the debtors and another		
			☐ Check if this is community property (see instructions)	\$20,638.00	\$20,638.00
3.2	Make: To	yota	Who has an interest in the property? Check one		claims or exemptions. Put
		coma	Debtor 1 only		red claims on Schedule D: laims Secured by Property.
	Year: 201	16	Debtor 2 only	Current value of the	Current value of the
	Approximate m	ileage: 60,000	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other informati	on:	At least one of the debtors and another		
			☐ Check if this is community property (see instructions)	\$19,114.00	\$19,114.00
5 A	dd the dollar v ages you have	ralue of the portion you ow attached for Part 2. Write	n for all of your entries from Part 2, includin that number here	ng any entries for=>	\$39,752.00
Part	Describe You	ur Personal and Household It	ems		
			terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E	ousehold goo d <i>xamples:</i> Major l No	ls and furnishings appliances, furniture, linens	s, china, kitchenware		
	Yes. Describe	9			
		Dresser-\$150; (Kid dresser-\$50	Queen Bed-\$750; Twin bed-250; Crib 4 i)	in one-\$100;	\$1,300.00
E □ □ □ □ 8. C €	including includ	ding cell phones, cameras, n e			
-		collections, memorabilia, co	prints, or other artwork; books, pictures, or othe blectibles	er art objects; stamp, com, or	vasevali card collections;

page 2

Schedule A/B: Property

Official Form 106A/B

D	ebtor 1	Dori J Motter		Case number (i	f known)
9.	Exampl	ent for sports and hobb les: Sports, photographic, musical instruments	ies exercise, and other hob	by equipment; bicycles, pool tables, golf clubs, skis;	canoes and kayaks; carpentry tools;
	■ No □ Yes.	Describe			
10	□ No	ms oles: Pistols, rifles, shotgu Describe	ns, ammunition, and rel	ated equipment	
		Smith	& Wesson 38 spec	al	\$50.00
11	□ No		rs, leather coats, design	er wear, shoes, accessories	
		All cl	othing		\$400.00
13	■ No □ Yes. Non-fa Exam ■ No □ Yes. Any of ■ No	ples: Everyday jewelry, concept bearing ples: Dogs, cats, birds, ho	rses shold items you did no	nent rings, wedding rings, heirloom jewelry, watches t already list, including any health aids you did n	
1				3, including any entries for pages you have attac	shed \$1,750.00
P	art 4: De	escribe Your Financial Asse	ıts		
D	o you o	wn or have any legal or o	equitable interest in ar	y of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16	□ No	ples: Money you have in y	·	e, in a safe deposit box, and on hand when you file y	our petition
				Cash	\$20.00
17	Exam			nts; certificates of deposit; shares in credit unions, broth the same institution, list each. Institution name:	
		17 1	Checking	Orrstown Bank	\$400.00
***************************************					and the state of t

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page 3

Schedule A/B: Property

Official Form 106A/B

De	btor 1	Dori J Motter	Case number (if known)
		mutual funds, or publicly traded stocks les: Bond funds, investment accounts with br	okerage firms, money market accounts
		Institution or issuer	name:
19.	Non-pu joint v	•	orated and unincorporated businesses, including an interest in an LLC, partnership, and
	No No		
	⊔ Yes.	Give specific information about them Name of entity:	% of ownership:
	Negoti	ment and corporate bonds and other neg- able instruments include personal checks, ca egotiable instruments are those you cannot tr	otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. Sansfer to someone by signing or delivering them.
		Give specific information about them Issuer name:	
		nent or pension accounts oles: Interests in IRA, ERISA, Keogh, 401(k),	403(b), thrift savings accounts, or other pension or profit-sharing plans
	Yes.	List each account separately.	
		Type of account:	Institution name:
		403(b)	Mutual America Financial Group \$399.37
			o that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies, or others
	□ Yes.		Institution name or individual:
	Annuit ■ No	ies (A contract for a periodic payment of mor	ey to you, either for life or for a number of years)
	☐ Yes	Issuer name and description.	
24.	26 U.S.	s in an education IRA, in an account in a cC. §§ 530(b)(1), 529A(b), and 529(b)(1).	qualified ABLE program, or under a qualified state tuition program.
	■ No □ Yes	Institution name and description	on. Separately file the records of any interests.11 U.S.C. § 521(c):
	■ No		other than anything listed in line 1), and rights or powers exercisable for your benefit
		Give specific information about them	
		s, copyrights, trademarks, trade secrets, a les: Internet domain names, websites, proce	
	☐ Yes.	Give specific information about them	
		es, franchises, and other general intangib oles: Building permits, exclusive licenses, coo	les perative association holdings, liquor licenses, professional licenses
		Give specific information about them	
Mo	oney or	property owed to you?	Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B

Schedule A/B: Property

D	ebtor 1	Dori J Motter		Case number (if known)	
28	□ No	funds owed to you Give specific information abou	ut them, including whether you alrea	dy filed the returns and the tax years	
			2022 IRS Refund	Federal	\$5,233.00
29	Exam _i ■ No	y support ples: Past due or lump sum ali Give specific information	mony, spousal support, child suppor	t, maintenance, divorce settlement, property	settlement
30	Exam _i ■ No	amounts someone owes you ples: Unpaid wages, disability benefits; unpaid loans you	u insurance payments, disability bene ou made to someone else	fits, sick pay, vacation pay, workers' compe	nsation, Social Security
31	Interes Exam ■ No	sts in insurance policies ples: Health, disability, or life i	nsurance; health savings account (H	ISA); credit, homeowner's, or renter's insura	nce
	☐ Yes.	•	y of each policy and list its value. iny name:	Beneficiary:	Surrender or refund value:
32	If you some	nterest in property that is durare the beneficiary of a living one has died. . Give specific information	e you from someone who has died trust, expect proceeds from a life ins	d surance policy, or are currently entitled to rec	eive property because
33	Exam ■ No	s against third parties, whet ples: Accidents, employment of the control of the c	her or not you have filed a lawsuit disputes, insurance claims, or rights	t or made a demand for payment to sue	
34	■ No	contingent and unliquidated . Describe each claim	d claims of every nature, including	g counterclaims of the debtor and rights t	o set off claims
35	■ No	nancial assets you did not a	Iready list		
3			r entries from Part 4, including an	y entries for pages you have attached	\$6,052.37
P	art 5: D	escribe Any Business-Related P	roperty You Own or Have an Interest I	n. List any real estate in Part 1.	
37	No. G	own or have any legal or equita So to Part 6. Go to line 38.	ble interest in any business-related pr	operty?	
P		escribe Any Farm- and Commer you own or have an interest in far	cial Fishing-Related Property You Owr mland, list it in Part 1.	n or Have an Interest In.	
46		ou own or have any legal or e	equitable interest in any farm- or c	commercial fishing-related property?	

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page 5

Schedule A/B: Property

Official Form 106A/B

Debt	tor 1	Dori J Motter		Case number (if known)	
	☐ Yes.	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That You Di	d Not List Above		
_		have other property of any kind you did not already list? les: Season tickets, country club membership			
	Yes. (Give specific information			
54.	Add ti	he dollar value of all of your entries from Part 7. Write that r	number here		\$0.00
Part	8:	List the Totals of Each Part of this Form	***************************************		4.46.40
55.	Part 1	: Total real estate, line 2	***************************************		\$109,980.00
56.	Part 2	: Total vehicles, line 5	\$39,752.00		
57.	Part 3	: Total personal and household items, line 15	\$1,750.00		
58.	Part 4	: Total financial assets, line 36	\$6,052.37		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$47,554.37	Copy personal property to	otal \$47,554.37
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$157,534.37

Official Form 106A/B Schedule A/B: Property page 6

Debtor 1	Dori J Motter			
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	PENNSYLVANIA	
Case number				
if known)				Check if this is ar amended filing

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

ŀa	rt 1: Identify the Property You Claim as E	xempt							
1.	Which set of exemptions are you claiming?	? Check one only, ever	ı if yo	ur spouse is filing with you.					
	☐ You are claiming state and federal nonbank	kruptcy exemptions.	11 U.S	.C. § 522(b)(3)					
	■ You are claiming federal exemptions. 11 U	J.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Check only one box for each exemption.							
	2018 Ford Edge 22,000 miles	\$20,638.00		\$0.00	11 U.S.C. § 522(d)(2)				
LI	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit					
	Dresser-\$150; Queen Bed-\$750; Twin	\$1,300.00		\$1,300.00	11 U.S.C. § 522(d)(3)				
	bed-250; Crib 4 in one-\$100; Kid dresser-\$50 Line from <i>Schedule A/B</i> : 6.1			100% of fair market value, up to any applicable statutory limit					
	Smith & Wesson 38 special	\$50.00		\$50.00	11 U.S.C. § 522(d)(5)				
	Line from Schedule A/B: 10.1			100% of fair market value, up to any applicable statutory limit					
	All clothing	\$400.00		\$400.00	11 U.S.C. § 522(d)(3)				
	Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit					
	Cash	\$20.00		\$20.00	11 U.S.C. § 522(d)(5)				
	Line from Schedule A/B: 16.1			100% of fair market value, up to any applicable statutory limit					

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Debtor	1 Dori J Motter			Case number (if known)	
	ief description of the property and line on hedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B Amount of the exemption you claim Check only one box for each exemption.		Specific laws that allow exemption	
				4	
	necking: Orrstown Bank	\$400.00		\$400.00	11 U.S.C. § 522(d)(5)
******	10 Holli Colloquio 772. 1711			100% of fair market value, up to any applicable statutory limit	
	3(b): Mutual America Financial	\$399.37		\$399.37	11 U.S.C. § 522(d)(12)
	roup ne from <i>Schedule A/B</i> : 21.1			100% of fair market value, up to any applicable statutory limit	
	ederal: 2022 IRS Refund	\$5,233.00		\$5,233.00	11 U.S.C. § 522(d)(5)
LII	ie ironi S <i>aledule Arb.</i> 20.1			100% of fair market value, up to any applicable statutory limit	
	e you claiming a homestead exemption ubject to adjustment on 4/01/25 and every No Yes. Did you acquire the property cove	3 years after that for ca	ases fi	•	
	Π Yes				

Fill in this information	to identify your	case:	ÁN ENV		ASS	
Debtor 1 Do	ri J Motter Name	Middle Name Last N	200			
Debtor 2	Name	Middle Name Last N				
United States Bankrupto	cy Court for the:	MIDDLE DISTRICT OF PENNSYLVA	NIA			
Case number (if known)						if this is an ed filing
Official Form 106 Schedule D: C	**********	Who Have Claims Sec	ured	by Property	y	12/15
is needed, copy the Addition number (if known). 1. Do any creditors have cl	onal Page, fill it or laims secured by ox and submit thi	s form to the court with your other sched	form. On t	the top of any addition	al pages, write your na	
for each claim. If more than much as possible, list the cl	If a creditor has mone creditor has a aims in alphabetical	ore than one secured claim, list the creditor se a particular claim, list the other creditors in Part al order according to the creditor's name.	t 2. As	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Ally Financial Creditor's Name		Describe the property that secures the clai 2018 Ford Edge 22,000 miles	m:	\$25,608.63	\$20,638.00	\$4,970.63
PO Box 380901 Bloomington, N 55438-0901	1N	As of the date you file, the claim is: Check al apply. Contingent	II that			
Number, Street, City, Sta		☐ Unliquidated ☐ Disputed				
Who owes the debt? Ch ■ Debtor 1 only □ Debtor 2 only	eck one.	Nature of lien. Check all that apply. An agreement you made (such as mortgage car loan)	ge or secu	red		
Debtor 1 and Debtor 2 c		☐ Statutory lien (such as tax lien, mechanic's ☐ Judgment lien from a lawsuit	s lien)			
Check if this claim relaced community debt	ates to a	Other (including a right to offset)	ımbered	d title		
Date debt was incurred	2021	Last 4 digits of account number	4953			

Debtor 1 Dori J Motter		Case number (if known)	Working* Babe Fill All	
First Name Middle N	ame Last Name			
Members 1st Federal Credit Union	Describe the property that secures the claim:	\$24,079.00	\$19,114.00	\$4,965.00
Creditor's Name	2016 Toyota Tacoma 60,000 miles			
5000 Louise Drive				
PO Box 40	As of the date you file, the claim is: Check all that			
Mechanicsburg, PA 17055	apply.			
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
Hamber, Street, Oxy, State & 2.19 Sode	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or se	cured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset) Encumber	red title		
Date debt was incurred 2021	Last 4 digits of account number 0001			
2.3 United Wholesale	Describe the property that secures the claim:	\$110,495.19	\$109,980.00	\$515.19
Mortgage Creditor's Name			7.00,000.00	
Siddle Siddle	113 W McClure St New Bloomfield, PA 17068 Perry County			
	Value determined by common level			
Bankruptcy Notices	times the assessed value.			
PO Box 619094	As of the date you file, the claim is: Check all that			
Dallas, TX 75261-9741	apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or se	ecured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Mortgage			
Date debt was incurred 2020	Last 4 digits of account number			
_	Column A on this page. Write that number here:	\$160,182	.82	
If this is the last page of your form, add Write that number here:	the dollar value totals from all pages.	\$160,182	.82	
		In the second se		

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

10	On participants are stated			and the state of t		[
Debto	123 12 20 20 20 20 1 1 1 1 1 1 1 1 1 1 1 1	ation to identify your o	:ase:			
Debic	л .	First Name	Middle Name	Last Name		
Debto (Spous	or 2 e if, filing)	First Name	Middle Name	Last Name		
Unite	d States Ban	kruptcy Court for the:	MIDDLE DISTRIC	CT OF PENNSYLVANIA		
Case (if know	number m)					☐ Check if this is an amended filing
Offic	ial Form	106E/F				
			ho Have Un	secured Claims		12/15
Schedi left. Att	ule D: Credito tach the Cont and case num	rs Who Have Claims Sec	ured by Property. If r e. If you have no info	nore space is needed, copy	the Part you need, fill it out,	secured claims that are listed in number the entries in the boxes on the top of any additional pages, write your
		rs have priority unsecure		1?	A CONTRACTOR OF THE CONTRACTOR	
	No. Go to Pa					
] _{Yes.}					
Part 2	2: List All	of Your NONPRIORIT	Y Unsecured Clai	ms		
	-	rs have nonpriority unsec	_	-		
	No. You have	e nothing to report in this p	art. Submit this form to	o the court with your other sch	edules.	
	Yes.					
ur th	nsecured claim	, list the creditor separately	/ for each claim. For e	ach claim listed, identify what	type of claim it is. Do not list of	tor has more than one nonpriority laims already included in Part 1. If more claims fill out the Continuation Page of
	art &.					Total claim
4.1		etter Health Kids Creditor's Name	Last	4 digits of account number	6601	\$1,587.90
	PO Box			n was the debt incurred?	2022	
	Number Str	reet City State Zip Code red the debt? Check one.		f the date you file, the claim	is: Check all that apply	
	Debtor		По	contingent		
	Debtor:	•		Inliquidated		
		1 and Debtor 2 only		disputed		
		one of the debtors and and		of NONPRIORITY unsecure	d claim:	
		if this claim is for a com	П.	tudent loans		
	debt	n subject to offset?		Obligations arising out of a sep	aration agreement or divorce	hat you did not
	13 tric ciair	ii subject to onset:	1000	t as phoney diamine		
	No No	n subject to onset?	•	bebts to pension or profit-shari	ng plans, and other similar de	ots

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 8

Debtor 1 Dori J Motter		Case number (if known)				
4.2	Dept Ed/NeInet Nonpriority Creditor's Name	Last 4 digits of account number	7717	\$6,656.54		
	PO Box 82561	When was the debt incurred?	2010-2011			
	Lincoln, NE 68501 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	Yes	Other. Specify				
4.3	Hamilton Health Center Inc Nonpriority Creditor's Name	Last 4 digits of account number	1149	\$145.00		
	110 S 17th St	When was the debt incurred?	1/14/2022			
	Harrisburg, PA 17104-3439					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	□Yes	Other. Specify Medical bil				
4.4	Kohl's/Capital One	Last 4 digits of account number	8667	\$1,199.93		
	Nonpriority Creditor's Name	_	The state of the s			
	PO Box 3043	When was the debt incurred?	2019			
	Milwaukee, WI 53201-3043 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not			
	No	Debts to pension or profit-shari	no plans, and other similar debts			
	Yes	• • • • • • • • • • • • • • • • • • • •				
	LI TES	Other. Specify Credit Cart	d purchases - Charged off			

Debtor	1 Dori J Motter		Case number (if known)	
4.5	Natera Inc	Last 4 digits of account number	2190	\$1,590.00
	Nonpriority Creditor's Name PO Box 889023	When was the debt incurred?	2021	
	Los Angeles, CA 90088 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical bill	ls	
4.6	Pediatrix Medical Group	Last 4 digits of account number	1360	\$1,917.00
	Nonpriority Creditor's Name PO Box 88087	When was the debt incurred?	2022	
	Chicago, IL 60680-1087 Number Street City State Zip Code	As of the date you file, the claim	in Charle all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	s. Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Medical bil	ls	
4.7	PennState Health Holy Spirit	Last 4 digits of account number	8605	\$141.75
	Nonpriority Creditor's Name	-		· · · · · · · · · · · · · · · · · · ·
	PO Box 983159 Boston, MA 02298	When was the debt incurred?	2021	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	☐ Yes	Other. Specify Medical bil		
	L 165	Other. Specify Interior Diff	10	

Deptor 1 Dori J Motter		ase number (if known)	
4.8 Quest Diagnostics	Last 4 digits of account number	D110	\$54.31
Nonpriority Creditor's Name PO Box 740795	When was the debt incurred?	2022	
Cincinnati, OH 45274 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and anot		claim:	
☐ Check if this claim is for a comm	unity Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separa report as priority claims	ation agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
Yes	Other. Specify Medical bill		
Riverside Anesthesia Nonpriority Creditor's Name	Last 4 digits of account number	9590	\$700.00
1 Rutherford Road Suite 101 Harrisburg, PA 17109	When was the debt incurred?	2/13/2022	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	_ '	claim:	
☐ Check if this claim is for a comm	nunity Student loans		
debt Is the claim subject to offset?		ation agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	plans, and other similar debts	
☐ Yes	Other. Specify Medical bill		
Synchrony Bank/Sam's Club		5829	\$831.30
Nonpriority Creditor's Name	Last 4 digits of account number		ΨΟΟ 1.50
Attn Bankruptcy Dept PO Box 965060	When was the debt incurred?	2021	
Orlando, FL 32896-5060 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and ano	ther Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a comm	-		
debt		ation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing	n plans, and other similar debts	,
■ No	, ,	•	
Yes	Other. Specify Credit card	purcnases	

Schedule E/F: Creditors Who Have Unsecured Claims

tor 1	Dori J Motter	Anny Page 2 and an	Case number (if known)	
	UPMC Pinnacle	Last 4 digits of account number	2469	\$206.00
J _	Nonpriority Creditor's Name	-		V
	PO Box 829901 Philadelphia, PA 19182-9901	When was the debt incurred?	2021	
-	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
1	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
-	Debtor 2 only	☐ Unliquidated		
1	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a place, and other similar debts	
	■ No	, ,		
	Yes	Other. Specify Medical bill		
l	UPMC Pinnacle	Last 4 digits of account number	9364	\$381.0
	Nonpriority Creditor's Name PO Box 829901 Philadelphia, PA 19182-9901	When was the debt incurred?	2021	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Medical bil		
1	UPMC Pinnacle	Last 4 digits of account number	9179	\$19,148.3
	Nonpriority Creditor's Name PO Box 829901	When was the debt incurred?	2021-2022	
_	Philadelphia, PA 19182-9901 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sep- report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-shari	ng plans, and other similar debts	
			- · · · · · · · · · · · · · · · · · · ·	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 5 of 8

Debtor	1 Dori J Motter		Case number (if known)					
4.1	UPMC Pinnacle	Last 4 digits of account numbe	r 9283	\$3,303.55				
-	Nonpriority Creditor's Name PO Box 829901	When was the debt incurred?	2022					
	Philadelphia, PA 19182-9901 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	n is: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
		☐ Unliquidated						
	Debtor 2 only	·						
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecur	red claim:					
	At least one of the debtors and another	Student loans	ed Claim.					
	Check if this claim is for a community debt		paration agreement or diverse that you did not					
	Is the claim subject to offset?	report as priority claims	paration agreement or divorce that you did not					
	■ No	Debts to pension or profit-share	ring plans, and other similar debts					
	Yes	Other. Specify Medical b	ill					
4.1	UPMC Pinnacle	Last 4 digits of account numbe	r 0312	\$21,713.35				
5	Nonpriority Creditor's Name			42. ,, 10.00				
	PO Box 829901 Philadelphia, PA 19182-9901	When was the debt incurred?	2021-2022					
•	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the clair	n is: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecu	red claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt		☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	Is the claim subject to offset?	<u></u>	ring plans, and other similar debts					
	■ No □ Yes	•						
	Lites	Other. Specify Medical b	/(II	AND STATE OF THE S				
Part 3:	List Others to Be Notified About a D	ebt That You Already Listed						
is tryir have r	is page only if you have others to be notified ng to collect from you for a debt you owe to s more than one creditor for any of the debts the d for any debts in Parts 1 or 2, do not fill out	someone else, list the original creditor nat you listed in Parts 1 or 2, list the ad	in Parts 1 or 2, then list the collection ager	ncy here. Similarly, if you				
	nd Address	On which entry in Part 1 or Part 2 did yo						
-	uter Credit Inc Dept 009696	Line 4.11 of (Check one):	Part 1: Creditors with Priority Unsecured C					
	ox 5238		Part 2: Creditors with Nonpriority Unsecure	ed Claims				
Winste	on Salem, NC 27113-5238	Last 4 digits of account number	5557					
Name ar	nd Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?					
	uter Credit Inc	Line 4.12 of (Check one):	☐ Part 1: Creditors with Priority Unsecured C	Claims				
	Dept 009696 ox 5238		Part 2: Creditors with Nonpriority Unsecure	ed Claims				
	on Salem, NC 27113-5238							
		Last 4 digits of account number	5557					
Name ar	nd Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?					
Comp	uter Credit Inc	Line 4.13 of (Check one):	☐ Part 1: Creditors with Priority Unsecured C	Claims				
	Dept 009696		■ Part 2: Creditors with Nonpriority Unsecure	ed Claims				
	ox 5238 on Salem, NC 27113-5238							
		Last 4 digits of account number	5557					

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 6 of 8

Debtor 1 Dori J Motter	Annah -	Case number (if known)
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?
Computer Credit Inc	Line 4.14 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Claim Dept 009696		Part 2: Creditors with Nonpriority Unsecured Claims
PO Box 5238		
Winston Salem, NC 27113-5238	Last 4 digits of account number	7058
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?
Credit Control LLC	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
3300 Rider Trail S Suite 500		Part 2: Creditors with Nonpriority Unsecured Claims
Earth City, MO 63045	Last 4 digits of account number	5022
	O hish at a is Dated as Date O	
Name and Address MRS BPO LLC	On which entry in Part 1 or Part 2 of Check one):	Did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims
1930 Olney Ave	Line 4.10 of (Check one).	•
Cherry Hill, NJ 08003		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	3722
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?
PennCredit Corp	Line 4.11 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
2800 Commerce Dr		Part 2: Creditors with Nonpriority Unsecured Claims
PO Box 69703		
Harrisburg, PA 17110	Last 4 digits of account number	9286
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?
PennCredit Corp	Line 4.12 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
2800 Commerce Dr		Part 2: Creditors with Nonpriority Unsecured Claims
PO Box 69703		— Fart 2. Oregitors with Horipholity offsecured organis
Harrisburg, PA 17110	t and Authors of annual according	
	Last 4 digits of account number	9286
Name and Address	On which entry in Part 1 or Part 2	•
PennCredit Corp	Line 4.13 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
2800 Commerce Dr PO Box 69703		Part 2: Creditors with Nonpriority Unsecured Claims
Harrisburg, PA 17110		
,	Last 4 digits of account number	9286
Name and Address	On which entry in Part 1 or Part 2	
PennCredit Corp_	Line 4.14 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
2800 Commerce Dr		Part 2: Creditors with Nonpriority Unsecured Claims
PO Box 69703 Harrisburg, PA 17110		
namsburg, FA 17110	Last 4 digits of account number	9286
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?
PennCredit Corp	Line 4.15 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
2800 Commerce Dr		Part 2: Creditors with Nonpriority Unsecured Claims
PO Box 69703		
Harrisburg, PA 17110	Last 4 digits of account number	9286
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?
Name and Address PennCredit Corp	Line 4.7 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
2800 Commerce Dr		Part 2: Creditors with Nonpriority Unsecured Claims
PO Box 69703		— Tare 2. Ordentors with Horiphority Orisecuted Oralins
Harrisburg, PA 17110	Last 4 digits of account number	6706
ALBORITA PROPERTY AND A STATE OF THE STATE O	aut a groot doodin nambol	0700
Part 4: Add the Amounts for Each Typ	oe of Unsecured Claim	
6. Total the amounts of certain types of unsectype of unsecured claim.	ured claims. This information is for stati	istical reporting purposes only. 28 U.S.C. §159. Add the amounts for each
type or unsecured claim.		Total Claim
6a. Domestic support ob	ligations	6a. \$
Official Form 106 E/F	Schedule E/F: Creditors Who Have U	nsecured Claims Page 7 of

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Official Form 106 E/F

والعرب الرائد المراثر	en della anni Vanan	rakin wilawi. Nanci wa 11 km, 14 km ani ani ani	in was her bottom a markania	de each troin and de week Albert in the	OSTAGORAL MARINES AND		
Fill in t	his infor	mation to identify your	case:				
Debtor	1	Dori J Motter					
		First Name	Middle Name	3	Last Name	-	
Debtor : (Spouse if		First Name	Middle Name	9	Last Name	-	
United S	States Ba	ankruptcy Court for the:	MIDDLE DIST	RICT OF PENNS	YLVANIA	-	
Case no	ımher						
(if known)			The age of the second s	Monte of the second			Check if this is an amended filing
		orm 106G	v Contrac	ets and U	nexpired Leases		12/15
Be as coinformal addition 1. Do 2. Lis exa	omplete tion. If m nal pages you hav No. Cheo Yes. Fill i t separa ample, re	and accurate as possib nore space is needed, c s, write your name and re any executory contra ck this box and file this fo in all of the information b	ole. If two marrie opy the addition case number (if cts or unexpired rm with the court elow even if the company with who	ed people are filinal page, fill it out known). d leases? with your other succentracts of leases	ng together, both are equally rest, number the entries, and attack chedules. You have nothing else the are listed on Schedule A/B:Propercontract or lease. Then state who is form in the instruction booklet for	o report on this rty (Official For at each contr	supplying correct ge. On the top of any s form. rm 106 A/B). act or lease is for (for
2.1	erson or	company with whom y Name, Number, Street, City		itract or lease	State what the contract or le	ase is for	
<u></u> 1	Number	Street					
_	City		State	ZIP Code			
2.2	Name					na kanama mamana ka euro wana di ziroo kifali wikidi ye edelebili dekokili di di	dick de Michigan (III) (
1	Number	Street			<u> </u>		
	City		State	ZIP Code			
2.3	Name				<u> </u>		
1	Number	Street					
CHIEF CONTRACTOR CONTR	City		State	ZIP Code			
2.4	Name		commenced to the Political Section of the Conference of the Confer	 			
	Number	Street					
	City		State	ZIP Code			
2.5	Name						
ī	Number	Street					
	City		State	ZIP Code			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Fill in this	s information to identify your	case:			
Debtor 1	Dori J Motter				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, fill	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	MIDDLE DISTRICT OF	PENNSYLVANIA		
Case num (if known)	nber			☐ Check if t amended	
Officia	al Form 106H				
	dule H: Your Cod	ebtors			12/15
fill it out, a	and number the entries in the e and case number (if known) you have any codebtors? (If you	boxes on the left. Attac . Answer every question	h the Additional Page to th n.	. If more space is needed, copy the Ad nis page. On the top of any Additional I a codebtor.	Pages, write
2. Wit				(Community property states and territorie ton, and Wisconsin.)	s include
_	o. Go to line 3. es. Did your spouse, former spou	use, or legal equivalent liv	ve with you at the time?		
in lin Form	e 2 again as a codebtor only i	f that person is a guara	ntor or cosigner. Make sur	your spouse is filing with you. List the re you have listed the creditor on Sche r). Use Schedule D, Schedule E/F, or Sc	dule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and Zi	P Code		Column 2: The creditor to whom you Check all schedules that apply:	owe the debt
3.1	Shaun J Mottor 321 Blue Hill Drive Shamokin Dam, PA 17876	;-		■ Schedule D, line □ Schedule E/F, line □ Schedule G Members 1st Federal Credit Union	on

Page 1 of 1

711	in this information to identify you	ır case:		S. S. S. S. S.	50.80				
Deb	otor 1 Dori J Mo	otter	7,000						
l .	otor 2			***************************************	_				
Unit	ted States Bankruptcy Court for	the: MIDDLE DISTRICT C	F PENNSYLVANIA						
1	se number own)		-			Check if this is: An amended A supplement 13 income a	nt showing		chapter
<u>O</u> 1	fficial Form 106l					MM / DD/ Y	YYY		
S	chedule I: Your Ir	ncome							12/15
sup _l	is complete and accurate as polying correct information. If youse. If you are separated and it is separate sheet to this for the Describe Employment.	you are married and not fili your spouse is not filing w rm. On the top of any additi	ng jointly, and your s ith you, do not includ	spouse i de inforn	s living nation a	with you, inclu about your spo	ide inform use. If moi	ation about y re space is ne	our eeded,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-fili	ing spouse	
	If you have more than one job, attach a separate page with information about additional	,	■ Employed			☐ Emplo	yed		
		Employment status	☐ Not employed			☐ Not en	nployed		
	employers.	Occupation	Dental Assistan	t		***************************************			
	Include part-time, seasonal, o self-employed work.	r Employer's name	Sadler Health Co	enter					
	Occupation may include stude or homemaker, if it applies.	ent Employer's address	100 North Hano Carlisle, PA 170		eet				
		How long employed t	here? since J	une 202	22				
Par	t 2: Give Details About	Monthly Income							
spou If yo	mate monthly income as of thuse unless you are separated. u or your non-filing spouse have a space, attach a separate shee	e more than one employer, c	-						_
					Fo	or Debtor 1	For Deb non-filir	otor 2 or ng spouse	
2.	List monthly gross wages, s deductions). If not paid month			2.	\$	3,352.77	\$	N/A	
3.	Estimate and list monthly of	vertime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Ac	dd line 2 + line 3.		4.	\$	3,352.77	\$	N/A	

Official Form 106

Debt	or 1	Dori J Motter	•	Case	number (if known)			
				For	Debtor 1		Debtor 2 or -filing spouse	
	Cop	by line 4 here	4.	\$	3,352.77	\$	N/A	
_								
5.	_	all payroll deductions:	-	•		æ		
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$ \$	400.66	\$_ \$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	-\$ 	N/A N/A	
	5c. 5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5c. 5d.	\$	67.06 0.00	\$ —	N/A	
	5u. 5e.	Insurance	5e.	\$	225.94	\$	N/A	
	5f.	Domestic support obligations	5f.	*-	0.00	\$	N/A	
	5g.	Union dues	5g.	\$	0.00	<u> </u>	N/A	
	5h.	Other deductions. Specify:	5h.+	- \$		+ \$ _	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	 6.	\$	693.66	\$	N/A	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,659.11	\$	N/A	
8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total		· _		_		
		monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce		\$		\$		
	04	settlement, and property settlement.	8c. 8d.	\$-	844.00	\$ _	N/A N/A	
	8d. 8e.	Unemployment compensation Social Security	8e.	\$ \$	0.00	\$ -	N/A N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$_	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.·	+ \$	0.00	+ \$	N/A	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	844.00	\$_	N/A	
10.		culate monthly income. Add line 7 + line 9. If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		3,503.11 + \$		N/A = \$	3,503.11
11.	Sta Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not excify:	deper		•		Schedule J. 11. +\$	0.00
12.	Wri	d the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certallies					1	3,503.11
13.		you expect an increase or decrease within the year after you file this form	ı?				Combin monthly	ed income
		Yes. Explain:						

Official Form 106l

511	in this informa	ition to identify yo	ur case:								
	otor 1	Dori J Motter					t if this is:				
Deb	Debtor 2						☐ An amended filing ☐ A supplement showing postpetition chapter				
	ouse, if filing)						3 expenses as of the				
Unit	led States Bankı	ruptcy Court for the:	: MIDDLE	DISTRICT OF PENNSYL	_VANIA	7	MM / DD / YYYY				
l	e number nown)										
Of	fficial Fo	rm 106J									
So	chedule	J: Your I	Exper	ises				12/15			
Be info	as complete ormation. If m	and accurate as	possible. eded, atta	If two married people ar							
Par		ribe Your House	hold					1.21-1.02			
1.	Is this a joir										
	■ No. Go to □ Yes. Doe	o line 2. es Debtor 2 live i	in a separ	ate household?							
	□ N □ Y		st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of Debte	or 2.				
2.	Do you hav	e dependents?	□ No								
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor	2	Dependent's age	Does dependent live with you?			
	Do not state dependents				daugher		8 months	□ No ■ Yes			
					son		3	□ No ■ Yes			
					***************************************			□ No			
								☐ Yes ☐ No			
								☐ Yes			
3.	expenses o	penses include If people other t d your depende	han 🗂	No Yes							
Est	imate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp							
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i> \			Your expe	nses			
4.		or home owners		ses for your residence. I r lot.	nclude first mortgage	4. \$	SILVA PARAMETER STATE OF THE ST	890.00			
	If not includ	ded in line 4:									
	4a. Real e	estate taxes				4a. \$		0.00			
		erty, homeowner's	s, or renter	's insurance		4b. \$		0.00			
			•	ıpkeep expenses		4c. \$		0.00			
E		owner's associat				4d. \$		0.00			
5.	Additional i	mortgage payme	ents for ye	our residence, such as ho	me equity loans	5. \$		0.00			

Official Form 106J

Schedule J: Your Expenses

Debto	or 1	Dori J M	otter	Case numl	ber (if known)	
6. l	Utiliti					
6	6a.	Electricity,	heat, natural gas	6a.	\$	0.00
6	6b.	Water, sev	ver, garbage collection	6b.	\$	150.00
6	6c.	Telephone	e, cell phone, Internet, satellite, and cable services	6c.	\$	140.00
€	6d.	Other, Spe	ecify:	6d.	\$	0.00
7. F	Food	and house	ekeeping supplies	7.	\$	925.00
8. (Child	Icare and c	hildren's education costs	8.	\$	120.00
9. (Cloth	ning, laund	ry, and dry cleaning	9.	\$	175.00
			roducts and services	10.	\$	50.00
			ntal expenses	11.	\$	25.00
			Include gas, maintenance, bus or train fare.			
			ar payments.	12.	\$	200.00
13. E	Ente	rtainment,	clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
14. (Char	itable cont	ributions and religious donations	14.	\$	0.00
		rance.	•			
[Do no	ot include in	surance deducted from your pay or included in lines 4 or 20.			
1	15a.	Life insura	nce	15a.	\$	0.00
1	15b.	Health ins	urance	15b.	\$	0.00
1	15c.	Vehicle ins	surance	15c.	\$	120.00
-	15d.	Other insu	rance. Specify:	15d.	\$	0.00
			clude taxes deducted from your pay or included in lines 4 or 20.			WARRIAGO AND THE STATE OF THE S
	Spec		, , ,	16.	\$	0.00
17. I	Insta	Ilment or le	ease payments:			
•	17a.	Car payme	ents for Vehicle 1	17a.	\$	499.40
	17b.	Car payme	ents for Vehicle 2	17b.	\$	0.00
•	17c.	Other, Spe	ecify:	17c.	\$	0.00
•	17d.	Other, Spe		17d.	\$	0.00
18. Y	Your	payments	of alimony, maintenance, and support that you did not report as	<u> </u>		
			your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
19. (Othe	r payments	s you make to support others who do not live with you.		\$	0.00
5	Spec	ify:		19.		
			erty expenses not included in lines 4 or 5 of this form or on Scho			
2	20a.	Mortgages	s on other property	20a.		0.00
2	20b.	Real estat	e taxes	20b.	\$	0.00
2	20c.	Property, I	homeowner's, or renter's insurance	20c.	\$	0.00
2	20d.	Maintenar	nce, repair, and upkeep expenses	20d.	\$	0.00
2	20e.	Homeown	er's association or condominium dues	20e.	\$	0.00
21. (Othe	r: Specify:	Auto maintenance, repairs, inspections & registration	21.	+\$	25.00
ı	Misc	gifts/cele			+\$	40.00
		gs/Medica			+\$	20.00
	Dias	Jorinoutou				
22. (Calc	ulate your	monthly expenses			ĺ
			through 21.		\$	3,479.40
:	22b.	Copy line 2:	2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
2	22c.	Add line 22	a and 22b. The result is your monthly expenses.		\$	3,479.40
			, , ,			
		-	monthly net income.	00	¢	0 800 44
			12 (your combined monthly income) from Schedule I.	23a.		3,503.11
- 2	23b.	Copy your	monthly expenses from line 22c above.	23b.	-\$	3,479.40
	00.	O. Internation	- All I am and the land			
2	23c.		our monthly expenses from your monthly income. is your monthly net income.	23c.	\$	23.71
		rne result	то убиг топину нествойне.			
24. I	Do v	ou expect a	an increase or decrease in your expenses within the year after y	ou file this	s form?	
l	For e	xample, do yo	ou expect to finish paying for your car loan within the year or do you expect you	ır mortgage	payment to increa	ase or decrease because of a
			terms of your mortgage?			
	■ N	0.				
1	□ Y	es.	Explain here:			
	'		Lancation of the second of the		***************************************	

Fill in this inform	nation to identify your	485			
Debtor 1	Dori J Motter First Name	Middle Name	Last Name		
Debtor 2	T NOT TRAINE	Wilder Hallie	20011101110		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	MIDDLE DISTRICT OF F	PENNSYLVANIA		
Case number					
(if known)	· · · · · · · · · · · · · · · · · · ·				☐ Check if this is an
					amended filing
Official Form	106Dec				
		n Individual	Debtor's Sch	edules	12/15
Doorar at					
If two married pe	ople are filing togethe	r, both are equally respor	nsible for supplying correc	t information.	
You must file this	s form whenever you f	ile bankruotov schedules	or amended schedules. M	aking a false state	ement, concealing property, or
obtaining money	or property by fraud i	n connection with a bank	ruptcy case can result in f	ines up to \$250,00	0, or imprisonment for up to 20
years, or both. 18	B U.S.C. §§ 152, 1341,	1519, and 3571.			
Sign	n Below				
Did you pay	y or agree to pay some	one who is NOT an attor	ney to help you fill out ban	kruptcy forms?	
■ No					
☐ Yes N	Name of person			Attach Ban	kruptcy Petition Preparer's Notice,
[] 163. i					, and Signature (Official Form 119)
		that I have read the sum	mary and schedules filed	with this declarati	on and
that they are	e true and correct.				
× Mal	J. Molton	· >	X		
'Dori J	Mótter re of Debtor 1		Signature of Do	ebtor 2	
•	1	1817			
Date /	une Ity o	2020	Date		
	·				
					•

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

FIII	n this inforn	nation to identify your	case:						
Deb	tor 1	Dori J Motter							
Deb	tor 2	First Name	Middle Name	Last Name					
	ise if, filing)	First Name	Middle Name	Last Name					
Unite	ed States Bar	nkruptcy Court for the:	MIDDLE DISTRICT OF PI	ENNSYLVANIA					
Casi	e number								
(if kno						heck if this is an			
			00-00-14-0-1-0-0-1-0-0-1-0-1-0-1-0-1-0-1	And a Property	a	mended filing			
~ · ·		407							
	icial Fo		Affaire for bedicio	luala Eiliaa faa D					
			Affairs for Individ			04/22			
Be as infor	s complete a mation. If m	ind accurate as possi ore space is needed,	ble. If two married people a attach a separate sheet to t	ire filing together, both are this form. On the top of an	equally responsible for sup r additional pages, write yoι	plying correct ır name and case			
num	ber (if know	n). Answer every que	stion.	•					
Part	1: Give D	etails About Your Ma	rital Status and Where You	Lived Before	ALL REAL WATER TO				
1.	What is you	r current marital statu	s?						
	MarriedNot mar	ried							
2.									
	During the last 3 years, have you lived anywhere other than where you live now?								
	□ No	4 - 1) - £ 4b 1	ived in the fact 2 years. Do no	at in alcola soft and societies and					
	Yes. Lis	t all of the places you i	ived in the last 3 years. Do no	ot include where you live how	·.				
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there			
	113 W Mc	Clure St	From-To:	☐ Same as Debtor	İ	☐ Same as Debtor 1			
	New Bloom	mfield, PA 17068	8/19/2020 thru 10/2022	I		From-To:			
			TOILULL						
3.	Within the la	ast 8 years, did you ev	er live with a spouse or leg	gal equivalent in a commun	ity property state or territory	y? (Community property			
state	s and territori	es include Arizona, Ca	lifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R	ico, Texas, Washington and V	Visconsin.)			
	■ No								
	☐ Yes. Ma	ike sure you fill out Scl	nedule H: Your Codebtors (Of	fficial Form 106H).					
Pari	2 Explai	n the Sources of You	r Income						
			nployment or from operatin u received from all jobs and a		ear or the two previous cale time activities.	ndar years?			
	If you are filir	ng a joint case and you	have income that you receive	e together, list it only once ur	nder Debtor 1.				
	□ No								
	Yes. Fil	in the details.							
			Debtor 1		Debtor 2				
			Sources of income	Gross income	Sources of income	Gross income			
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)			
Fro	m Januarv 1	of current year until	Magas samminaine	\$16,187.36	☐ Wages, commissions,	,			
		d for bankruptcy:	Wages, commissions, bonuses, tips	Ų. 3, 101.30	bonuses, tips				
			☐ Operating a business		☐ Operating a business				

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Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Official Form 107

Debtor 1 Do	ri J Motter			Cas	e number (if known)		
		S	ebtor 1 burces of income neck all that apply.	Gross income (before deductions and exclusions)	Sources of inconcess of inconcess all that a	pply.	Gross income (before deductions and exclusions)
For last calen (January 1 to			Wages, commissions, onuses, tips	\$19,231.00	☐ Wages, com bonuses, tips	missions,	
			Operating a business		☐ Operating a	business	
For the calend (January 1 to		4 2024 \	Wages, commissions, onuses, tips	\$28,646.57	☐ Wages, com bonuses, tips	missions,	
			Operating a business		☐ Operating a	business	
■ No □ Yes.	Fill in the det	De Se	ebtor 1 ources of income escribe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
	r Debtor 1's	or Debtor 2's d	de Before You Filed for	Bankruptcy			
☐ No.			tor 2 has primarily constructions or 2 has primarily constructions. The construction of the construction o	umer debts. Consumer deb old purpose."	ts are defined in 11	U.S.C. § 101((8) as "incurred by an
	During the 9	Go to line 7.		id you pay any creditor a tota id a total of \$7,575* or more			e total amount vou
		paid that credit not include pay	or. Do not include paymer ments to an attorney for t	nts for domestic support obli	gations, such as ch	nild support an	d alimony. Also, do
Yes.			oth have primarily consi you filed for bankruptcy, d	umer debts. id you pay any creditor a tota	al of \$600 or more	?	
	■ No.	Go to line 7.					
	□ _{Yes}	include payme	n creditor to whom you pa nts for domestic support o s bankruptcy case.	id a total of \$600 or more an obligations, such as child sur	d the total amount port and alimony.	you paid that o Also, do not in	creditor. Do not clude payments to an
Creditor'	's Name and	Address	Dates of payme	ent Total amount paid	Amount you still owe	Was this pa	ayment for

7.	Within 1 year before you filed for bankruptour Insiders include your relatives; any general particles of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	irtners; relatives of any gene control, or owner of 20% or	eral partners; partners more of their voting	erships of which yo g securities; and ar	u are a general parti ny managing agent,	including one for			
	■ No								
	☐ Yes. List all payments to an insider.								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this p	ayment			
8.	Within 1 year before you filed for bankrupte	cy, did you make any payr	ments or transfer a	any property on a	ccount of a debt th	at benefited an			
	insider? Include payments on debts guaranteed or cos	igned by an insider.							
	■ No								
	☐ Yes. List all payments to an insider								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this placed include creditor's				
Pai	t 4: Identify Legal Actions, Repossession	ns. and Foreclosures							
	List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.	cases, small claims actions	, divorces, collectio	n suits, paternity a	ctions, support or cu	ıstody			
	Case title	Nature of the case	Court or agency		Status of the cas				
	Case number	Nature of the case	Court or agency		Otatus of the cas				
	Dori J. Motter vs. Shaun J. Motter CV-2022-92	Civil	Perry County (Common Pleas Perry County (2 East Main St New Bloomfiel	s Courthouse reet	Pending On appeal Concluded				
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.								
	No. Go to line 11.								
	☐ Yes. Fill in the information below.								
	Creditor Name and Address	Describe the Property		Date		Value of the			
		Explain what happened	I			property			
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?								
	No Transport								
	Yes. Fill in the details.								
	Creditor Name and Address	Describe the action the	creditor took	Date takei	action was า	Amount			
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a		rty in the possess	sion of an assigne	ee for the benefit of	creditors, a			
	■ No								
	☐ Yes								

Case number (if known)

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

Debtor 1 Dori J Motter

Official Form 107

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.								
	No Silling to the sil								
	Yes. Fill in the details. Person Who Received Transfer Address	Description and val	d b	Describe any property or payments received or debts	Date transfer was made				
	Person's relationship to you		ı	paid in exchange					
19.	Within 10 years before you filed for bankru beneficiary? (These are often called asset-pri		property to a self-	settled trust or similar device	e of which you are a				
	Yes. Fill in the details.	B ook to the contract	6.44		Data Tanadanii				
	Name of trust	Description and val	ue of the property	transferred	Date Transfer was made				
Da.	18: List of Certain Financial Accounts, In	etrumente Safa Denoeit F	Royae and Storage	a Units					
•	Within 1 year before you filed for bankruptor sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, associated	cy, were any financial acco	ounts or instrumer	nts held in your name, or for					
	No								
	Yes. Fill in the details.	I 4 dinta - f	T	- Dete	Last balance				
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	•	Type of account o instrument	r Date account was closed, sold, moved, or transferred	Last balance before closing or transfer				
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed for b	ankruptcy, any sa	fe deposit box or other depo	ository for securities,				
	■ No								
	☐ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, Stre State and ZIP Code)		cribe the contents	Do you still have it?				
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?								
	■ No □ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or ha to it? Address (Number, Stre State and ZIP Code)		cribe the contents	Do you still have it?				
Pa	rt 9: Identify Property You Hold or Contro	I for Someone Else							
23.	Do you hold or control any property that so for someone.	omeone else owns? Includ	de any property yo	ou borrowed from, are storing	g for, or hold in trust				
	□ No								
	Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prope (Number, Street, City, Sta Code)		scribe the property	Value				
	Gabriel M. Motter, minor 1074 Leroy Dr Newport, PA 17074	Orrstown Bank PO Box 250 Shippensburg, P		MA savings account	\$141.60				

Case number (if known)

Official Form 107

Debtor 1 Dori J Motter

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Deb	otor 1	Dori J Motter	C	ase number (if known)					
Par	t 10:	Give Details About Environmental Info	rmation						
For	the p	urpose of Part 10, the following definitio	ns apply:						
	•	,							
	toxic	ironmental law means any federal, state, c substances, wastes, or material into th llations controlling the cleanup of these	e air, land, soil, surface water, groundwa						
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.								
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.								
Rep	ort al	ll notices, releases, and proceedings tha	t you know about, regardless of when th	ney occurred.					
24.	Has	any governmental unit notified you that	you may be liable or potentially liable ur	nder or in violation of an environm	nental law?				
		No							
		Yes. Fill in the details.							
		ne of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Hav	e you notified any governmental unit of a	any release of hazardous material?						
		No Yes. Fill in the details.							
		ne of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Hav	e you been a party in any judicial or adm	inistrative proceeding under any enviro	nmental law? Include settlements	and orders.				
		No							
		Yes. Fill in the details.							
		se Title se Number	Court or agency N Name Address (Number, Street, City, State and ZIP Code)	lature of the case	Status of the case				
Pai	t 11:	Give Details About Your Business or C	Connections to Any Business	ALL MANUELON					
27.	With	nin 4 years before you filed for bankrupto	cy, did you own a business or have any	of the following connections to ar	ny business?				
		☐ A sole proprietor or self-employed in	a trade, profession, or other activity, ei	ther full-time or part-time					
		☐ A member of a limited liability compa	any (LLC) or limited liability partnership	(LLP)					
		☐ A partner in a partnership							
		☐ An officer, director, or managing exe	ecutive of a corporation						
		☐ An owner of at least 5% of the voting	or equity securities of a corporation						
		No. None of the above applies. Go to P	art 12.						
		Yes. Check all that apply above and fill	in the details below for each business.						
		siness Name dress	Describe the nature of the business	Employer Identification numb Do not include Social Security					
		CITESS mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed	, number of fills.				

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1	Dori J Motter	Case number (if known)	
28. Withi instit	in 2 years before you filed for bank utions, creditors, or other parties.	uptcy, did you give a financial statement to anyone about your business? Include all financial	
	No Yes. Fill in the details below.		
Nam Add (Num		Date Issued	
Part 12:	Sign Below		
are true a with a bar 18 U.S.C.	nd correct. I understand that makinkruptcy case can result in fines u §§ 152, 1341, 1519, and 3571.	Financial Affairs and any attachments, and I declare under penalty of perjury that the answers g a false statement, concealing property, or obtaining money or property by fraud in connectio to \$250,000, or imprisonment for up to 20 years, or both.	n
Dori J M Signatur	otter e of Debtor 1	Signature of Debtor 2	
Date /	une 22, 2023	Date	
Did you a	ttach additional pages to Your Sta	ement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?	
■ No	, 5	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
☐ Yes			
Did you p ■ No	ay or agree to pay someone who i	not an attorney to help you fill out bankruptcy forms?	
	ame of Person Attach the Ba	kruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).	

* 5		and MAN, inside outlines to the Co. There is the Zee Arms, in Charles As Release and a street	•
Fill in this inform	nation to identify your case:		
Debtor 1	Dori J Motter	Leet Name	
Debtor 2	First Name Middle Name	Last Name	
(Spouse if, filing)	First Name Middle Name	Last Name	
United States Ba	nkruptcy Court for the: MIDDLE DISTR	ICT OF PENNSYLVANIA	
Case number			
(if known)			☐ Check if this is an amended filing
			amended ming
Official Ea	rm 108		
Official Fo		viduala Filina Unday Chani	10 × 7
Statemer	it of intention for indi	viduals Filing Under Chapt	LEF 7 12/15
If you are an indi	vidual filing under chapter 7, you must	fill out this form if:	
	e claims secured by your property, or		
•	ed personal property and the lease has	•	A feed to see the feed
		er you file your bankruptcy petition or by the date the time for cause. You must also send copies to t	
on the	form		
	eople are filing together in a joint case, but date the form.	ooth are equally responsible for supplying correct	information. Both debtors must
J		is needed, attach a separate sheet to this form. O	on the top of any additional pages
	our name and case number (if known).	is needed, attach a separate sheet to this form.	in the top of any additional pages,
Part 1: List Yo	our Creditors Who Have Secured Claims	3	
1 For any credit	ore that you listed in Part 1 of Schedule	D: Creditors Who Have Claims Secured by Prope	rty (Official Form 106D), fill in the
information be	elow.		
identify the cr	editor and the property that is collateral	What do you intend to do with the property th secures a debt?	as exempt on Schedule C?
Creditor's A	ally Financial	☐ Surrender the property.	□ No
name:	•	☐ Retain the property and redeem it.	_
Description of	2018 Ford Edge 22,000 miles	Retain the property and enter into a	Yes
property	20 10 1 014 Edgo 22,000 111100	Reaffirmation Agreement. Retain the property and [explain]:	
securing debt:			envelopation 1-to
Creditor's N	lembers 1st Federal Credit Union	Surrender the property.	■ No
name:		☐ Retain the property and redeem it.	_
Description of	2046 Tayata Tagama 60 000	☐ Retain the property and enter into a	☐ Yes
Description of property	2016 Toyota Tacoma 60,000 miles	Reaffirmation Agreement. Retain the property and [explain]:	
securing debt:		- Totali the property and texplains.	
Creditor's U	nited Wholesale Mortgage	Surrender the property.	■ No
name:		Retain the property and redeem it.	П.у.
Description of	113 W McClure St New	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
	Bloomfield, PA 17068 Perry	neammadon Agreement.	

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Statement of Intention for Individuals Filing Under Chapter 7

page 1

Official Form 108

ebtor 1 Dori J	Motter	Case number (if known)
property securing debt:	County Value determined by common level times the assessed value.	☐ Retain the property and [explain]:
	ır Unexpired Personal Property Leases	
the information	below. Do not list real estate leases. U	I in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), nexpired leases are leases that are still in effect; the lease period has not yet ender the trustee does not assume it. 11 U.S.C. § 365(p)(2).
escribe your un	expired personal property leases	Will the lease be assumed?
essor's name:		□ No
escription of leas roperty:	red	☐ Yes
essor's name:		□ No
escription of leas roperty:	ed	☐ Yes
essor's name:	4	□ No
Description of leas Property:	ea	☐ Yes
essor's name: Description of leas		□ No
Property:	ed	☐ Yes
.essor's name:		□ No
Description of leas Property:	eu	☐ Yes
.essor's name:		□ No
Description of leas Property:	sea	☐ Yes
essor's name:		□ No
Description of leas Property:	sea	☐ Yes
Part 3: Sign Be	elow	
nder penalty of property that is so	perjury, I declare that I have indicated n ubject to an unexpired lease.	ny intention about any property of my estate that secures a debt and any personal
· Moria	Abouter	X
Dori J Mot Signature of		Signature of Debtor 2
Date M	ine 12, 2023	Date

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

United States Bankruptcy Court Middle District of Pennsylvania

In re	Dori J Motter	TVARW.	ne District of I chasyivani	Case No.		
	DOI O MOLECT		Debtor(s)	Chapter	7	A Section 1997
	DISC	LOSURE OF COMPE	NSATION OF ATTOR	NEY FOR D	EBTOR(S)	
C	ompensation paid to m	e within one year before the fili	6(b), I certify that I am the attorne ng of the petition in bankruptcy, of of or in connection with the bank	or agreed to be paid	to me, for services rende	ered or to
	For legal services,	I have agreed to accept		\$	1,200.00	
	Prior to the filing o	of this statement I have received		\$	1,200.00	
					0.00	
2. T	he source of the compo	ensation paid to me was:				
	■ Debtor □	Other (specify):				
3. T	he source of compensa	ation to be paid to me is:				
	■ Debtor □	Other (specify):				
4. I	I have not agreed to	share the above-disclosed com	pensation with any other person u	nless they are men	nbers and associates of m	y law firm.
ľ	I have agreed to sha copy of the agreeme	are the above-disclosed compensent, together with a list of the na	sation with a person or persons who the people sharing in the common that it is a second to be set on the common with the comm	no are not member compensation is att	s or associates of my law ached.	firm. A
5. I	n return for the above-	disclosed fee, I have agreed to r	ender legal service for all aspects	of the bankruptcy	case, including:	
b. c.	Preparation and filin Representation of the [Other provisions as Negotiations reaffirmation	g of any petition, schedules, sta e debtor at the meeting of credit needed] s with secured creditors to	dering advice to the debtor in deter tement of affairs and plan which a tors and confirmation hearing, and reduce to market value; exer ons as needed; preparation a busehold goods.	nay be required; I any adjourned he nption planning	arings thereof; ; preparation and filir	ng of
6. B	Representati	debtor(s), the above-disclosed for ion of the debtors in any diversary proceeding.	ee does not include the following schargeability actions, judic	service: ial lien avoidand	ces, relief from stay a	ctions or
			CERTIFICATION			
this ba	nkruptcy proceeding.	ng is a complete statement of ar	ny agreement or arrangement for p		representation of the debt	tor(s) in
Da	te		Donald K. Zagursk Signature of Attorney			
			Johnston & Zagur			
			117 Main Street PO Box O			
			Mifflin, PA 17058	* 400 0		
			717-436-8044 Fax jzmlawoffice@gma			
			Name of law firm			_